



PTO/SR/30 (10-01) Approved for use through 10/31/2002. OMB 0651-0031

FOR

CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: **Commissioner for Patents Box RCE** Washington, DC 20231

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Application Number	09/036,236	
Filing Date	March 6, 1998	
First Named Inventor	Oliver	
Art Unit	2765-3625	
Examiner Name	Thompson	
Attorney Docket Number	CLICK 201	

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2. Submission required under 37 CFR 1.114 a. Previously submitted Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____ (Any unentered amendment(s) referred to above will be entered). Consider the arguments in the Appeal Brief or Reply Brief previously filed on ______ iii. 🗌 Other b. X Enclosed i. 🔽 Amendment/Reply iii. Information Disclosure Statement (IDS) Other ii. Affidavit(s)/Declaration(s) 2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) b. Other 3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. a. 🔀 The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-0427 -----01/07/2003 AWUNDAF1 00000037 09036235 RCE fee required under 37 CFR 1.17(e) 370.00 OP x Extension of time fee (37 CFR 1.136 and 1.17) 02 FC:2253 460.00 GP Other _____ b. Check in the amount of \$_____ enclosed c. X Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Name (Print /Type)	Steven M. Hoffberg	Registration No. (Attorney/Agent)	33,511
Signature	Ann	Date 12/23/62	
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CERTIFICATE OF MAILING OR TRANSMISSION

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Name (Print/Type)	Steven M. Hoffberg	
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